## Tournament/Event Rental Agreement

Seminole County
264 West North Street
Altamonte Springs, Florida 32714
Please complete sections I, II, and V

Parks and Recreation Division (407)788-0405

FAX: (407)788-7790

You are required to sign and date your agreement. Falsification of the information provided herein may result in rescission of the Agreement or cancellation of the event/program.

event/program.					
I.		A	PPLICATION		
APPLICANT/SPONSOR	NAME:			Phone: (W)	(H)
Address: Street			City	StateZip	Country
Authorized Representative	e: Name			Phone: (W)	(H)
FACILITY REQUESTED	D:		Date(s)	Requested:	
Event Hours: From	To	Esti	imated: Participants Veh	icles	Spectators
Name of Event:			Description of Event:		
	l- f 4-l				
Submit proposed schedu II.	ne for matches or gan		TAL DECLIECTS		
			CIAL REQUESTS		
			No If Yes,		
Do you need the County's	s Food Concessions ava	nilable? Yes	No If Yes, Dates	to	Times to
			ree (3) 10' x 10' tents set up at Applicant/		
		-	ents and must obtain required permits fro	-	
			f Yes, explain:		
			XHIBITION GAMES/TICKETS SALES	WILL BE PERMITTI	ED BY THE US SOCCER
TEAMS OR OTHER TE					
NOIE: Parks	s & Recreation Manag	er must review & appro	ve all items to be sold in park.		
III.			USER FEES		
<b>ITEM</b>	<b>HOUR</b>	LY RATE	<b>7 DAY PRIOR NOTICE</b>	HOU	JRLY RATE
Field rental:	\$ 10.00	8 am to 5 pm	<b>Maintenance Crew:</b>		fter 3:30 pm weekdays
	\$ 20.00	5 pm to 10 pm	4 Consecutive Hours Minimum (Optional)	or on Saturday Holidays	ys, Sundays and County
<b>Tennis court:</b>	\$ 2.00	8 am to 5 pm	Event Staff 4 Consecutive Hours Minimum		er staff member during
	\$ 4.00	5 pm to 10 pm	(Determined by Parks Division)	C v Ciit iioui s	
Racquetball court	<b>:</b> \$ 4.00	8 am to 10 pm	Day Camps	\$40.00 per day	y per site
Cancellations must be ma 48 hour notice deadline.	de at least 48 hours pri	or to scheduled date. The	ere will be no refunds, adjustments, or rec	luction to fees for can	cellations or changes after the
		THE COUNTY DOES	NOT PROVIDE TOURNAMENT ST	AFF.	
IV.			FEES		
FACILITIES REQ	UESTED		USER FEES		
			\$	<u> </u>	
			\$	<u></u>	
			\$	<u>—</u>	
			\$	<u> </u>	
			\$	<u>—</u>	
		OTAL AGREEMENT	\$	(due on 1 <sup>st</sup> day of	
NO SOCCER	EXHIBITION GAMES		L BE PERMITTED BY THE US SOCC FACILITY AT SYLVAN LAKE PARK.	ER TEAMS OR OTH	IER TEAMS USING THE
		Make checks	Payable to: SEMINOLE COUNTY	ND CACII	
			ST BE IN U.S. FUNDS DO NOT SE ne(s) scheduled, Applicant/Sponsor will		urs
			Bill is payable within 7 days of compl		

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## V.HOLD HARMLESS AND INDEMNIFICATION AGREEMENT/INSURANCE REQUIREMENTS The Applicant/Sponsor hereby promises and agrees to indemnify and save harmless the County of Seminole, its officers, agents, and employees, from and against any and all liability, claims, damages, demands, expenses, fees, fines, penalties, suits, proceedings, actions and costs of actions, including attorney's fees for trial and on appeal, of any kind and nature arising or growing out of or in any way connected with the performance of the Agreement whether by act or omission of the Applicant/Sponsor, officers, agents, servants, employees or others, or because of or due to the mere existence of the Agreement between the parties. COPYRIGHT LAW: Applicant/Sponsor assumes all costs arising from the use of patented, trademarked or copyrighted materials, equipment, devises, processes or dramatic rights used on or incorporated in the conduct of any program/event covered under the Agreement; and Applicant/Sponsor agrees to indemnify and hold harmless the County of Seminole, its officers, agents, and employees, from all damages, costs and expenses in law or equity for or on account of any patented, trademarked or copyrighted materials, equipment, devises, processes or dramatic rights furnished or used by Applicant/Sponsor in connection with the Agreement and will defend the County of Seminole, its officers, agents, and employees, from any such suit or action, regardless of whether it be groundless or fraudulent. The undersigned agrees to abide by the regulations governing said facility and is responsible for all charges incurred. Applicant/Sponsor is responsible for any and all commitments to the sanctioning body for the program/event. Applicant/Sponsor Signature Date VI. CONFIRMATION (OFFICE USE ONLY) Contract Approved \_ Disapproved By Authorization of: Recreation Supervisor

			Reason	son:				
				Received after deadline		dead	line Incomplete Application	
				Date not available		able	Other:	_
			COPIES OF T	THIS	CONTRAC	ΓΜΑ	AILED TO (CHECK):	
			DATE					DATE
	]	Applicant			[	]	Tourism Development Events Office	
	]	Sheriff's Office			[	]	Parks/Recreation Manager	
	]	Building Dept.			]	]	Leisure Services Director	
	]	Public Safety			[	]	Support Services	
Coi	nmen	ts:						

## SEMINOLE COUNTY PARKS AND RECREATION DIVISION

Red Bug Lake Park 3600 Red Bug Lake Road

Casselberry, FL 32707 Phone: 407-695-7113 FAX; 407-695-8945

Sanlando Park 401 W. Highland Street Altamonte Springs, FL 32714 Phone: 407-869-5966

FAX: 407-869-5315

**Seminole County Softball Complex** 

264 W. North Street Altamonte Springs, FL 32714 Phone: 407-788-0609

FAX: 407-788-7790

Sylvan Lake Park

845 Lake Markham Road Sanford, FL 32771 Phone: 407-322-6567

FAX: 407-324-4317

THE PARKS AND RECREATION DIVISION IS AN EQUAL OPPORTUNITY ORGANIZATION AND DOES NOT DISCRIMINATE ON THE BASIS OF RACE. RELIGION, AGE, SEX, NATIONAL ORIGIN OR DISABILITY IN ITS FACILITY USES OR PROGRAMS.